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Council Offices,

MARKET RASEN.

3rd October, 1944.

Gentlemen,

As my appointment as Medical Officer of Health was from February, 1943, I do not feel competent to do more than submit the Sanitary Inspectors report for the year 1942.

Statistics in regard to notifiable diseases and births and deaths were similarly not available so I have not included these.

I am,

Your obedient Servant,

(Sgd) R.J.R. Mecredy.

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ANNUAL REPORT OF THE SANITARY INSPECTOR.

To the Chairman and Members of the MARKET RASEN URBAN DISTRICT COUNCIL.

Gentlemen,

I respectfully desire herewith to present my Annual Report of activities and work during the year 1942.

Present emergency conditions have absorbed quite an amount of work and time during the year, but efforts made in the Public Health sphere have brought goodresults, with some improvement in District Sanitary circumstances.

There is room for improvement in Local Milk-producing premises. Some Cow houses are far from good. Times are bad at present for securing the necessary Structural alterations etc. but no effort has been spared to achieve the object and some improvements have been made.

I regret to report that the local Working-class Housing Standard in the District is low and much improvement is desirable, which immediately conditions allow for the securing of alterations, additions, improvements etc. both the Medical Officer and myself hope the Council will authorize and instruct action to be taken where necessary, with a view to raising the Standard.

LIBRARY

I remain,

Gentlemen,

Your obedient Servant,

JOHN POTTS.
Sanitary Inspector.

Detail of Inspections made during the year.

Under the Public Health Act.	171
do do reinspections	205
Overcrowding inspections.	5

Visits made in course of duties.

Infectious Diseases.	22
Rooms disinfected.	11
Dirty and non-satisfactory houses.	10
Verminous Premises.	6
Rooms disinfested.	4
Articles destroyed for Vermin and Infectious Disease.	4
Refuse collections.	40
Refuse Bins.	15
Smoke Nuisances.	3
Factories.	5
Drainage.	51
do (testing)	17
Shop Acts and Food.	17
Fried Fish Shops.	3
Meat Shops.	6
Bakehouses.	4
Cowsheds and Dairies.	20
Closets and Conveniences.	60
Rats and Mice.	10
Water Supply.	6
Water Sampling.	3
General Relative matters.	35
Food Sampling.	1
Total	353.

/over

FOOD INSPECTION.

Due to the present existing War conditions and current circumstances of centralized Slaughtering, little Animal slaughter now takes place in the District. Such slaughter being in emergency cases only.

One Pig Carcass and one Bacon-pig have been examined, the Pig Carcass was found fit forhuman consumption and the Bacon-pig condemned for contamination by Blue-vitriol.

Other foods examined include Tinned meats, Rice, Mincemeat andportions of Ham etc. The total weight of such food condemned is 162 lbs. Food so condemned, wherever possible, was disposed of for Salvage recovery and the balance destroyed.

K² 11.

(B)

TABLE OF **POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS,** *coming to the knowledge of the Medical Officer of Health, during the year* 1896, *in the* Marlborough *Urban District; classified according to* DISEASES, AGES *and* LOCALITIES.

Names of Localities adopted for the purpose of these Statistics; Public Institutions being shown as separate localities. (See Note 2 on back of sheet.) (a.)	Population at all Ages. Census 1891. (b.)	Population at all Ages. Estimated to middle of 1896. (c.)	Registered Births. (d.)	Aged under 5 or over 5. (e.)	New Cases of Sickness in each Locality, coming to the knowledge of the Medical Officer of Health. 1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	5 Fevers. Typhus.	6 Enteric or Typhoid.	7 Continued	8 Relapsing	9 Puerperal	10 Cholera.	11 Erysipelas.	12	13	Number of such Cases Removed from their Homes in the several Localities for Treatment in Isolation Hospital. 1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	5 Fevers. Typhus.	6 Enteric or Typhoid	7 Continued	8 Relapsing	9 Puerperal	10 Cholera.	11 Erysipelas.	12	13
Marlborough	3012		73	Under 5			3													1										
				5 upwds.			3								2															
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Totals	3012		73	Under 5			3													1										
				5 upwds.			3								2															

State here whether "Notification of Infectious Disease" is compulsory in the District yes. Since when? _____ Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in which such Hospital is situated; and if not within the District, state where it is situated Marlborough Urban Isolation Hospital.

NOTES ON TABLE B.

(See also Notes on back of Table A.)

NOTE 1. The present *Table B.* is concerned with population, births, and sickness (not with mortality) in the district or division to which the Table relates.

2. As stated in the heading of Col. *(a)*, *Public Institutions* should be regarded as separate localities, and the new cases of sickness in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received, are Public Institutions for the purpose of these statistics.

3. *Comments on any unequal incidence of notifiable disease upon the several localities, and considerations as to the local incidence of consumption and other prevalent diseases, should be made in the text of the Report.*

W B & L (555u) 67749—10200-10-96

K$_2$ 3.

(A)

TABLE OF DEATHS during the Year 1896, in the Marlborough Urban District,

classified according to DISEASES, AGES, and LOCALITIES.

Names of Localities adopted for the purpose of these Statistics; public institutions being shown as separate localities. (See note 4 on back of sheet.) (Columns for Population and Births are in Table B.) (a)	Mortality from all causes, at subjoined Ages. At all ages. (b)	Under 1 year. (c)	1 and under 5. (d)	5 and under 15. (e)	15 and under 25. (f)	25 and under 65. (g)	65 and upwards. (h)	(i)	1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	5 Fevers. Typhus.	6 Enteric or Typhoid.	7 Continued	8 Relapsing	9 Puerperal.	10 Cholera.	11 Erysipelas.	12 Measles.	13 Whooping Cough.	14 Diarrhœa and Dysentery	15 Rheumatic Fever.	16 Phthisis.	17 Bronchitis, Pneumonia and Pleurisy.	18 Heart Disease.	19 *	20 Injuries.	21 All Other Diseases.	22 Total.
Marlborough	29	6	4	–	1	3	15	Under 5			1																		5	6
								5 upwds.											1			1			4	1	3		11	23
								Under 5																						
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								5 upwds.																						
Totals								Under 5																						
								5 upwds.																						

The subjoined numbers have also to be taken into account in judging of the above records of mortality. *See Note 5 on back.*

Deaths occurring outside the district among persons belonging thereto.	2						2	Under 5																						
								5 upwds.																					2	2
Deaths occurring within the district among persons not belonging thereto.								Under 5																						
								5 upwds.																						

* The heading of column 19 is left blank for the insertion of Influenza, or any other disease which it may be thought desirable to record.

NOTES ON TABLES A AND B.

NOTE 1. *Medical Officers of Health of "Combined Districts" must make a separate Return for the District of each District Council.*

2. *Medical Officers of Health acting for a portion only of the District of a District Council should write, in the heading of the Table, the designation of the Division for which they act.*

3. *The words "Urban," "Rural," or "Metropolitan" must be inserted in the appropriate space in the heading, according as the District is Urban or Rural, or is within the Metropolitan Area.*

4. The "*Localities*" adopted for the purpose of these statistics should be areas of known population; such as parishes, groups of parishes, townships or wards.

As stated at the head of the first column in each Table, *Public Institutions* should be regarded as separate localities, and the deaths in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received are Public Institutions for the purpose of these statistics.

5. *The deaths which have to be classified in this Table* (A), and summed up in the horizontal line of "Totals," are the whole of those *registered* as having actually occurred in the several localities comprised within the Division or District. But the registered number of deaths frequently requires correction before it can give an exact view of the mortality of a Division or District; and the two lowest horizontal lines are provided for the purpose of enabling Medical Officers of Health to indicate, to the best of their ability, what the extent of such corrections should be. Details concerning the corrective figures, *e.g.*, the institutions that have been considered, or the particular localities to which corrections apply, may appear in the text of the report or in supplementary tables.

Area and Population of the District or Division to which this Return relates.

Area in Acres 196.

Population (1891) 3012.

" (Estimated to middle of 1896) _____

Death Rates.
- General 9.6. (per 1,000 Population, estimated to middle of 1896.)
- Infant (under one year of age) 82.1. (per 1,000 Births Registered.)

In recording the facts under the various headings of Tables A and B, attention has been given to the notes endorsed on the Tables.

P. H. Hayden *Medical Officer of Health.*

(Date) Feby, 1897.

W B & L (555v)—67735—10200-10-96

complete record of the number of houses supplied as often no information is given when the water is being laid on to private houses. This should not be the case, notice should be given to the inspector in every case & the method of supplying the water. (Taps, pipes, disconnecting cisterns etc) approved before the water is allowed to be turned on.

Analyses of wells. Analyses have been made of the water in three wells during 1896 & in every case the water has been condemned as being more or less polluted with the products of sewage decomposition. The wells have been closed & the water laid on.

Drainage. The question of sewerage & sewage disposal is still under the consideration of the Town Council. & the services of an Engineer & Consulting Engineer have been obtained. The portion of the scheme relating to sewage disposal is necessarily the most debatable & it is on this portion of the scheme that the opinion of an expert, whose knowledge extends over many systems of sewage disposal is most necessary. The regulation of the house drainage is a most important consideration for the Council. And as I noticed last year all new work & alterations of old drains should be inspected before being covered in & new drains water tested. The byelaws relating to disconnection and ventilation should be rigidly enforced in all new work. In addition it would be well to have definite rules laid down as to the kind of closet pans & flushing tanks to be allowed. Not long since, after the filling up of a cesspit, wh: I had reported as a source of nuisance, a form of closet was substituted wh: is

likely to become as bad a nuisance as the original cesspit

Cesspits. Several cesspits have been done away with. Many still exist. The emptying has been carried out with more regularity & recorded.

Cottage Accommodation Cottage accommodation is still much needed. The Council have resolved to build 3 new cottages.

Bakehouses. I have inspected the Bakehouses with the Sanitary Inspector & have found them clean & well kept.

Cowsheds. The cowsheds have been inspected regularly. Water from the public supply has been laid on to all premises where cowsheds exist.

Slaughter Houses. The slaughter houses have been regularly inspected. In one a suggested improvement has been carried out wh: was much needed.

Infectious Disease. Six cases of Diphtheria occurred in the Borough in June, Oct: & Decr with one fatal case. Two of these occurred in children under 10 years old. Of whom one died without medical attendance the diagnosis being made by culture of the Bacillus after death. The other 4 cases were treated in the Antitoxic (Ruffers) & recovered without complication. In one of these the bacillus were shewn to be present in the secretions of the throat more than 11 wks after the attack began, in another 7 wks & in another 6 wks. In the fourth the bacillus was still present 7 wks after. In one of the children after removal of the tonsils although the bacillus was not present on the surface, it was discovered by microscopical examination situated in the substance of the tonsil. Three of the cases occurred in one family in the months of June Oct & Dec

the eldest child of this family died in August 1894 of Diphtheria & at that time one of the other children had a sore throat wh: was supposed not to be Diphtheria - Since that time the family had moved to a different part of the town in wh: Diphtheria had never before been notified -

The Cultivation Experiments prove the possibility of the Diphtheria bacilli lying quiescent in the throats of apparently perfectly healthy individuals for many weeks in a position wh: cannot be affected by germicidal applications - and the history of this one family suggests the possibility of the bacilles remaining in the quiescent stage for very much longer periods. These facts shew the necessity for prolonged isolation after an attack of Diphtheria

Sanitary improvements. During 1896. Several sanitary improvements have been carried out - including the drainage of Kennett Place, after special report. Improvement of Highwall Cottages, wh: I had condemned as unfit for human habitation. The drainage of Kingsbury Terrace -

Food & drugs act. On Oct 10. 172 lbs of meat were condemned wh: had been exposed for sale at a stall in the High St:

Statistics of mortality, Births, & Infectious disease are appended to this report -

Signed

J. H. Hayden BA. MB.

M.O.H.

Wardbury L.